Last	Name	01 1 10	Joan y	ear begi	<u> </u>	First Nan	ne and Middle		d endin	3		_, 2005.	Social Se	ecurity No.	
Spou	se's Last Name	if Different				Spouse's	First Name a	and Middle	e Initial			Deceased	oouse's S	ocial Security No.	
Mailir Addre										City		State		Zip Code+4	
Filing Chec	Status k One	Single		Married filin joint return	ig]		nd both filing returns on		Married a separate on separa			Married filing separate return spouse is not fi		Head of Househol (see instr	
	dency k One		sident Year	2	Nonre Full Y	sident		sident rt Year		ive date of c	nange	State moved to		tate moved from:	4007107
Exe	mptions				_					month		lumn A (for sing , separate, or he		Column B (for spou	
	Yourself		egular		65 or Over		Blind	г.		ال مداد ما د	John	of household)	lad v	box 3 is check	
	Spouse	· · · · · · · · · · · · · · · · · · ·							ter number ter number			1.		2.	
	Dependents D	ependent's F	ull Name	e	Dependen	t's Social Se	ecurity Number	Rela	tionship]					
	elf or spouse									3. Depen	dents	3.		3.	
										4. Handicap	ped Depende	ent 4.		□ 4.	
5. Ac	dd lines 1, 2, 3 ar	nd 4 (if addition	nal depe	ndents, see	instructions).				To	ı tal Exem	ptions	5.		5.	
Fnto	- amaiinta		- n fod	laval vatu								Round to			
	r amounts i Wages, sal	•				Attach c	opies of W	/-2(s) fr	om all st	ates 6	. \square	if no entr	y leave	DIATIK	6.
	Taxable inte	erest incor	me			Attach Fe	ederal Sch	edule if	over \$1	,500 7			-		7.
8.	Dividend in									•			-		8.
	Net busines Capital gair												+		9.
	Supplemen	, ,													11.
12.	2. Rents, royalties, partnerships, estates, trusts, etc.														
	Attach Fede				8582 an	\neg							-		12.
	Total IRA di Total pensio			a.			Taxable an Taxable an		Attac 1099						13b. 14b.
	Social secu			a			Taxable an		1098	15l					15b.
16.	Net farm in	come (Los	ss)						l Schedu	ıle F 16	i.		_		16.
17.	Other incon		refund_				-								
	unemploym		linos 6	thru 17		(specify))		Total	17 ⇒ 18					17. 18.
19.	Adjustments														10.
	Student loar	n interest_		Tuitior	and fee	S	1/2 SE T	_ ax							
	HSA	_							LE	19	٠ 📙		_		19.
	Early withdraged ederal adjusting		,		, , –					20	.				20.
	te: Line 20 n														
21.	Interest and	dividends	s on st	ate, cour	ity, or mu	nicipal bo	onds (Non-	-Montar	na)	21					21.
22.	Federal inco	me tax refu	unds/o	verpayme	ent (see pa	age 3, line	22 on inst	tructions	s)	22	.				22.
23.	Other additi	ions, (see	page 3	3, line 23	of instruc	ctions)				-					
	Specify 24. Total	additions t	to inco	me (add li	ines 21 th	ru 23\			Total	23 ⇒ 24					23. 24.
				,		,									25.
26.	Farm Risk	Manageme	ent Acc	count				Attac	ch Form I	FRM 26			1		7 26.
27.	Interest excl	-													27.
28.	Interest exclusion for savings bonds, etc. Specify														28.
29.	, , —									-					29.
	Unemployment Medical Care Savings Account														30. 31.
	ŭ														32.
	First Time Home Buyers Account														33.
34.	Health care									34	.		-		34.
35.		,		•		,				35					35.
36.	Total reduct														36.
37.	Subtract line		,			•				-					37.

DEDUCTIONS	Foi	rm 2 Page 2 - 2004 Social Security Number/_/	Column A (for single joint, separate, or head of household)	Column B (for spouse only when filing separate, and box 3 is								
				<u> </u>	checked	-						
	38.	,				38.						
ЕD		Deductions Check only one										
	39.	(A) Standard deduction: (A)										
SN	40	(B) Itemized deductions: (B) (B	39.			39.						
EXEMPTIONS	40.	Subtract line 39 from 38 and enter balance	····· ⇒ 40.[40.						
ΛΡΤ	41	Exemptions (All filers are entitled to at least one exemption) Multiply \$1,840 times the number of exemptions on line 5	41.	I		1 44						
ΧË		Taxable income. Subtract line 41 from line 40				41. 42.						
Û	72.	Taxable modifie. Subtract into 41 from into 40	⇒ *²-			42./						
		Nonresidents and Part-Year Residents complete and attach Sc	hedules III and IV	Form 2A. before proc	eedina							
	•	43. Tax from table below. Non/part-year residents enter the amount from line 130, Form 2A										
COMPUTATION	43.	Schedule IV. If line 42 is less than zero, enter zero here										
	44.	Tax on lump sum distributions (see instructions for this line). Attach Federa			44.							
	45.	Subtotal - Add lines 43 and 44	Subtotal ⇒ 45.			45.						
Ε	46.	•				46.						
<u>P</u>	47.	Balance - Subtract line 46 from 45 and enter difference (but not less than a	zero) ⇒ <u>47</u> .			47.						
ő	48.	Other tax, penalties and repayment, see page 6 (specify)	48.			48.						
TAX C		For <u>each</u> of the programs below enter any amount you and your spouse want to contribute.										
¥	.141	Enter totals in boxes on line 52 (see instructions for details).										
		Nongame Wildlife Child Abuse Agriculture in Program Prevention Schools Ent.	er total amount									
	d		oxes 52.			52.						
	53.	Total Tax —Add lines 47, 48, and 52	Total => 53.			53.						
	54.	Combine amounts shown on line 53 columns A and B	⇒ 54.			ر .54						
		55. Montana tax withheldAttach withholding st	tatements 55.	I		55.						
PAYMENTS AND CREDITS		56. Payments of 2004 estimated tax and amounts credited from previous y	=1			56.						
		57. Payment made with extension				57.						
		58. Elderly Homeowner/ Renter Credit Attach F				58.						
PAY ND		59. Total of lines 55 thru 58	Total 59.			59.						
. ◀	60.	Combine amounts shown on line 59 columns A and B	⇒60.			60.						
		61. If line 60 is larger than line 54 enter the difference. This is your o				=						
		or. If the ours larger than the 34 enter the difference. This is your o				ı >						
			verpayment	61.		61.						
		62. Amount on line 61 to be applied to 2005 estimate 62.		01.								
		62. Amount on line 61 to be applied to 2005 estimate 62 63. Enter the amount from line 61 you want refunded to you (refunds more to provide the provided to you want refunded to you want refunded to you (refunds more to provide the provided to you want refunded	han \$1.00 will be issued)	Refund 63.		61.						
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When you file your Montana income tax return electronically you represent that you have retained all documents required as a tax record and that you will provide a copy to the department upon request.